

THE CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION

APPRENTICESHIP PROGRAM

ACKNOWLEDGEMENT OF RECEIPT

Apprentice:

Your signature on this document confirms that you have printed from the CDCR website the required documents for the Apprenticeship Program:

- Apprenticeship Program Standards
- Apprenticeship Program Operating Procedures

Additionally, your signature certifies that you have read and understand the Program requirements and your responsibility as an Apprentice.

Print Name

Date Signed

Signature